#### FOR INSTRUCTIONS, SEE BACK OF FORM

## DISCLOSURE SUMMARY PAGE

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

CONSULTANT BREAKDOWN (Schedule G Attached?)

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

CANDIDATE COMMITTEES ONLY:

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed

Effective May 1, 2010, all statements and reports for State PACs and State

FORM DR-2 DISCLOSURE (Rev. 12/2009) REPORT For Office Use Only Comm. # Logged In Scanned Computer Audited

YES

NO

Parties must be filed electronically. Reset Form COMMITTEE NAME (Must be same as on Statement of Organization) Vargas For Recorder IMPORTANT: Indicate by # type of committee you are reporting for: 5 (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party 4 )County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC ( 11) Local Ballot Issue CANDIDATE COMMITTEES ONLY: Candidate Name Political Party (if applicable) Rita Vargas Democratic Office Sought District (if Senate or House) Scott County Recorder

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports. 563-285-7322 SIGNATURE OF PERSON FILING REPORT DATE SIGNED I AM FILING A Januarary 19, 2013 REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. (report date) Indicate by # 2 CHECK IF AMENDMENT TO REPORT DATED Local Committees, enter Date of Election Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a DR-3 is filed.) County & Local Committees, enter County in which Election is held STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) 475.87 ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ..... 162.84 Schedule F: Loans Received total (Attach Schedule F) Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... (Schedule H applies to Candidates' Committees Only) 638.71 SUB-TOTAL....\$ SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)..... 77.04 Schedule F: Loan Repayments total (Attach Schedule F)..... CASH ON HAND at the end of this reporting period (if final report balance must be zero) ......\$ 561.67 \*\*UNPAID BILLS (From Schedule D - Attach Schedule D).....\$ \*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)......\$

For Instructions, S	ee Back of Form
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### CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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COMMITTEE NAME (Must be same as on Statement of Organization)	CHECK THIS BOX IF  AMENDING FORM
Vargas for Recorder	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
4/26/12	ID#	Elda Ewoldt, 613 N. 6th St., Eldridge, IA 52748		\$25	
5/30	ID# CK#	Rita Vargas, 2724 Leclair St., Davenport, IA 52803	canidate	\$50	
6/15/12	ID#	US Bank Refund		12.84	
7/31/12	ID#	Rita Vargas		25	
9/12	ID# CK#	Rita Vargas		25	
12/21/12	ID#	Rita Vargas		25	
	ID# CK#				
	ID#				
	ID# CK#				
	ID# CK#				
			SUB-TOTAL		A SERVICE AND ADDRESS OF THE PARTY OF THE PA

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) . If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)

162.84

TOTAL (if last page of this schedule)

SCHEDULE

(Rev. 07/03)

MONETARY

RECEIPTS

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

MONETARY
EXPENDITURES

CHECK THIS BOX IF
CHECK THIS BOX II
AMENDING FORM

COMMITTEE NAME	(Must be	same as on	Statement	of Organization)
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Vargas for Recorder

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	ID# CK#			\$
2/12	ID# CK#	US Bank	Bank fees and tax	12.84
3/12	ID# CK#	US Bank	Bank fees and tax	12.84
4/12	ID# CK#	US Bank	Bank fees and tax	12.84
5/12	ID# CK#	US Bank	Bank fees and tax	12.84
5/12	ID# CK#	US Bank	Bank fees and tax	12.84
7/12	ID# CK#	US Bank	Bank fees and tax	12.84
	ID# CK#			

SUB-TOTAL

TOTAL (if last page of this schedule)

\$ 77.04

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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